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CONFIRMATION NO. 6309

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| SERIAL NUMBER 10/685,761 | FILING or 371(c) DATE 10/15/2003 RULE | CLASS 604 | GROUP ART UNIT 3731 | ATTORNEY DOCKET NO. 1291.1121109 |
| APPLICANTS Thomas W. Davison, North Attelboro, MA; Timothy E. Taylor, Attelboro, MA; Adam Sher, North Dartmouth, MA; | | | | |
| ** CONTINUING DATA ***** This application is a CON of 09/772,605 01/30/2001 PAT 6,800,084 which is a CIP of 09/137,335 08/20/1998 PAT 6,187,000 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 01/13/2004 | | | | |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/VICTOR X NGUYEN/</u> Examiner's Signature | <input type="checkbox"/> Met after Allowance VN Initials | STATE OR COUNTRY MA | SHEETS DRAWINGS 2 | TOTAL CLAIMS 22 |
| INDEPENDENT CLAIMS 2 | | | | |
| ADDRESS CROMPTON, SEAGER & TUFTE, LLC 1221 NICOLLET AVENUE SUITE 800 MINNEAPOLIS, MN 55403-2420 UNITED STATES | | | | |
| TITLE Cannula for receiving surgical instruments | | | | |
| FILING FEE RECEIVED 680 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |